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Bib Data Sheet

CONFIRMATION NO. 6445

SERIAL NUMBER 10/629,661	FILING DATE 07/29/2003 RULE	CLASS 600	GROUP ART UNIT 3739	ATTORNEY DOCKET NO. BIO-177
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APPLICANTS

Assaf Govari, Haifa, ISRAEL;

** CONTINUING DATA *****

h ** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 10/29/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY ISRAEL	SHEETS DRAWING 3	TOTAL CLAIMS 48	INDEPENDENT CLAIMS 6
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>				

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TITLE
 Lasso for pulmonary vein mapping and ablation

FILING FEE RECEIVED 1636	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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